STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Official Use Only

COVER PAGE

Please type or print in ink.	ZUIB MAR 28 AM 9: 4.9
NAME OF FILER (LAST) (FIRST)	(MIDDLE)
Gibicar Philip	Mathias
1. Office, Agency, or Court	ring a resource
Agency Name (Do not use acronyms) Natural Resources Agency Division, Board, Department, District, if applicable Your Position	
Dept. of Conservation - Division of Oil, Gus, & Geothern	al Keson res
▶ If filling for multiple positions, list below or on an attachment.' (Do not use acronyms)	
Agency: Position:	
2. Jurisdiction of Office (Check at least one box)	
☑ State ☐ Judge or Court Commissi	ioner (Statewide Jurisdiction)
Multi-County County of	
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2017, through	eft/
December 31, 2017. (Check one)	
The period covered is/, through O The period covered is/_ leaving office.	s January 1, 2017, through the date of
Assuming Office: Date assumed/ O The period covered is the date of leaving of	s/, through ffice.
Candidate: Date of Election and office sought, if different than Part 1:	
4. Schedule Summary (must complete) ► Total number of pages including this co	over page:
Schedules attached	
Schedule A-1 - Investments – schedule attached	Business Positions - schedule attached
☐ Schedule A-2 - Investments – schedule attached ☐ Schedule D - Income – Gifts – s	schedule attached
	Travel Payments - schedule attached
-or- □ None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY STAT (Business or Agency Address Recommended - Public Document)	TE ZIP CODE
801 K. St. MS 20-20, Socramento, CA 95814	
DAYTIME TELEPHONE NUMBER ' E-MAIL ADDRESS	
(916) 322-9770 philip. gibicar c	conservation ca-gov
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best herein and in any attached schedules is true and complete. I acknowledge this is a public document.	of my knowledge the information contained
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and	correct.
Date Signed 3-28-18 Signature Rule N	1. Physin
	igned statement with your filing official.)

SCHEDULE A-1

Investments

CALIFORNIA FORM 700

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CONTRACT MANAGEMENT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Total and the	Street, J.	Contraction	4-7- COL	Art Tier	1,450
lame							

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
General Electric	Exxon Mobil
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Industrial Conglomerate including Villous	Oil and Gus Producer
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
SOUTHER COMPANY GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Weility	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
] \$100,001 - \$1,000,000 Over \$1,000,000	U \$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
O amino antico	•
Comments:	